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<b>SERIAL NUMBER</b> 10/606,533	<b>FILING OR 371(c) DATE</b> 06/26/2003 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3736	<b>ATTORNEY DOCKET NO.</b> DEP5054	
<b>APPLICANTS</b> James M. Rhodes, Warsaw, IN; Oscar F. Salcido, Mentone, IN; Herbert E. Schwartz, Ft. Wayne, IN;					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/16/2003</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance		<b>STATE OR COUNTRY</b> IN	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 45	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> 27777					
<b>TITLE</b> MODULAR SURGICAL INSTRUMENT WITH RECIPROCABLE IMPLEMENT					
<b>FILING FEE RECEIVED</b> 1368	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

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